



Blood Pump Development Using Rocket Engine Flow Simulation Technology

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by

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Outline of Talk



- Introduction / Motivation
- Mechanical Heart Assist Devices
 Computational Issues and Requirements
 Pulsatile Device
 Axial Flow Pump
- Computational Technology for Rocket Pump Flow Solver Development
 Flow Simulation Procedure for Rocket Pump
- Computational Approach for VAD Development CFD Applications to Blood Pump Design
- Summary and Discussion



Mechanical Assist Devices



- Motivation
 - Over 5 million Americans and 20 million people worldwide suffer from Congestive Heart Failure (CHF)
 - CHF patients are still treated with drug therapy, however, at late stage heart transplantation is traditionally the only treatment hope



Mechanical Assist Devices



Motivation

- Need for assist devices is very high

Need : 25,000-60,000 / YR Donor hearts available : 2,000-2,500 / YR

(e.g. more than 4,000 patients were on the waiting list in 1999)

- Need to find right match
- Heart pump or VAD, for ventricular assist device, is being used as a temporary support to sick ventricle

"BRIDGE-TO-TRANSPLANT"



Mechanical Assist Devices



Motivation

- VAD vs Drug treatment,
 recent study suggests that
 - Survival rate for <u>VAD</u> patients vs for patients receiving <u>drug</u> treatment
 After 1 year 52 % vs 24.7% (it also depends on the methods and drugs used)
 After 2 years 22.9 % vs 8.1 %
 - Some patients who stayed in ICU because of short of breath can walk a block after 1 year assisted by VAD



Mechanical Assist Devices



- Motivation
 - VAD vs Drug treatment
 - However, complication rate for VAD is 2.35 times higher than that for drugs

Complications include infections, bleeding, and mechanical malfunctions like motor failure, deformed tube and worn bearings

⇒ Design improvements are needed to lower the risk, and possibly to use it as a permanent therapy (long-term device)

"BRIDGE-TO-RECOVERY"



Mechanical Heart-Assist Devices



- Heart Valves
- Ventricular Assist Device (VAD)

Pulsatile Pump

- Piston Driven : Low speed, Bulky

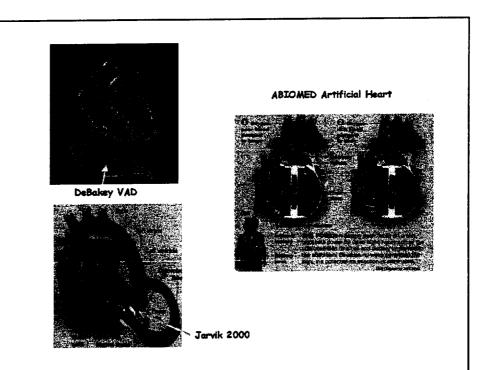
- Pneumatically Driven : Need external support equipment

Rotary Pump

- Axial Flow Pump : High speed, Small

⇒ DeBakey VAD is based on this concept

• Total Artificial Heart





Ventricular Assist Device



Requirements

- Simplicity and Reliability
- Small size for ease of implantation
- Supply 5 liter/min of blood against 100 mmHg pressure
- High pumping efficiency to minimize power requirements
- Minimum Hemolysis and Thrombus Formation



Computational Issues



- Geometry / grid definition
 Moving boundary
- Solver
 Time accurate solver
- Physical modeling
 Newtonian vs non-Newtonian
 Turbulence
- Experimental & clinical data



Solver: Viscous Incompressible Flow



Formulation

Can be viewed as a limiting case of compressible flow where the flow speed is insignificant compared to the speed of sound (Preconditioned compressible N-S eq.)

⇒ Artificial compressibility approach

- Artificial Compressibility Method (Chorin, 1967)

INS3D family of codes

Merkie et. al many more

Or truly incompressible

- ⇒Pressure projection approach
 - MAC (Harlow and Welch, 1965)
 - Fractional Step Method (Chorin, 1968; Yanencko, 1971; Marchuck, 1975....)
 - SIMPLE type Pressure Iteration (Caretto et al., 1972; Patanka & spalding, 1972...)
- ⇒Use derived variables
 - Vorticity-Velocity (Fasel, 1976; Dennis et al., 1979; Hafez et al., 1988
 - Stream function-vorticity

Artificial Compressibility Method



Formulation

$$\frac{1}{\beta}\frac{\partial p}{\partial t} + \frac{\partial l_i}{\partial x_i} = 0$$

- Introduces hyperbolic behavior into pressure field. Speed of pressure wave depends on the artificial compressibility parameter, $\boldsymbol{\beta}.$
- The equations are to be marched in a time like fashion until the divergence of velocity converges to zero. ⇒ Relaxes incompressibility requirement.

Time variable during this process does not represent physical time step.

For time-accurate solutions

- Iterate the equations in pseudo-time level for each time step until incompressibility condition is satisfied.
 - \Rightarrow Efficient sub-iteration is the key for success



Artificial Compressibility Method (INS3D-UP)



- Time accuracy is achieved by subiteration
- Discretize the time term in momentum equations using second-order three-point backward-difference formula

 $\frac{3q^{m'}-4q''+q''''}{\text{Introduce a psecitivitime level and artificial compressibility,}}$

- Iterate the equations in pseudo-time for each time step until incompressibility condition is satisfied.

$$\frac{1}{\Delta \tau} (p^{\text{**i,m+1}} - p^{\text{**i,m+1}}) = -\beta q^{\text{**i,m+1}}$$

- $\frac{1.5}{1.5}(q^{min+1} q^{min}) = -(rhs)^{min+1} \frac{3q^{min} 4q^{n} + q^{n-1}}{2\Delta t}$ • Code performance
- Computing time: 50-120 ms/grid point/iteration (on C90 single cpu)
- Memory usage: Line-relaxation 45 words/grid point GMRES-ILU(0) 220 words/grid point



Pressure Projection Method(INS3D-FS)



- Approach in generalized coordinates
 - Finite volume discretization
 - Accurate treatment of geometric quantities
 - Dependent variables pressure and volume fluxes
 - Implicit time integration
 - Fractional step procedure Solve auxiliary velocity field first, then enforce incompressibility condition by solving a Poisson equation for pressure.
- Code performance
- Computing time: 80 ms/grid point/iteration (on C90 single cpu)
- Memory usage: 70 words/grid point



Pressure Projection Method



- Fractional-step
 - Solve for the auxiliary velocity field, using implicit predictor step:

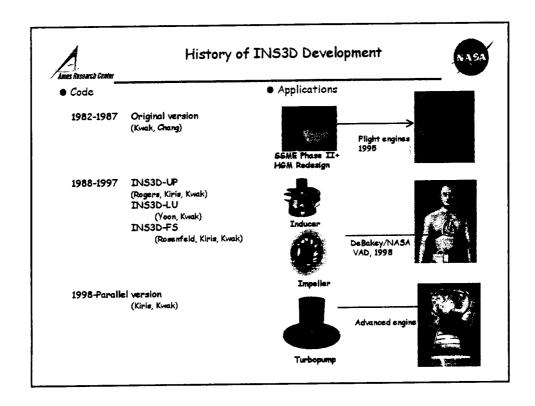
$$\frac{1}{\Delta t}(u_{\iota}^*-u_{\iota}^*)=-\nabla p^*+h(u_{\iota}^*)$$

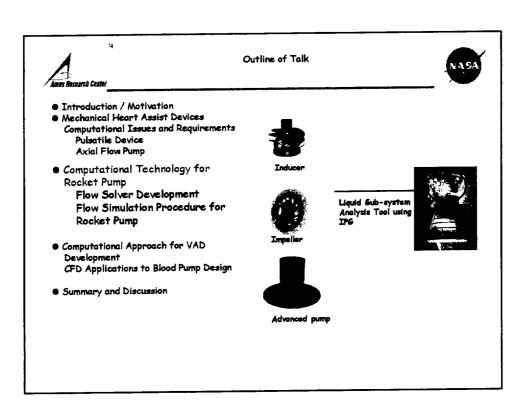
- The velocity field at time level (n+1) is obtained by using a correction step:

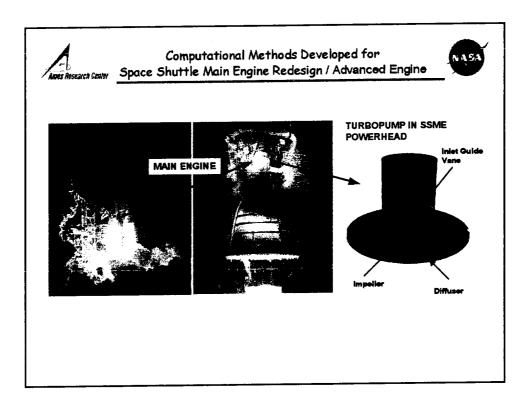
$$\frac{2}{\Lambda t}(u_{i}^{**1}-u_{i}^{*}) = -\nabla p^{**1} + h(u_{i}^{**1}) - \nabla p^{*} + h(u_{i}^{*})$$

- The incompressibility condition is enforced by using a Poisson equation for pressure ($p' = p^{m} - p$

$$\nabla^{2} p' = \frac{2}{\Lambda t} \nabla \cdot u'$$





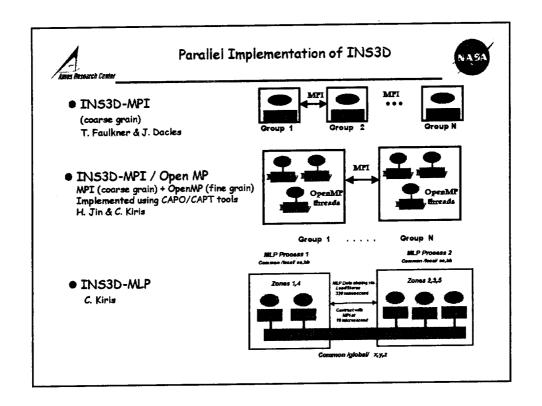


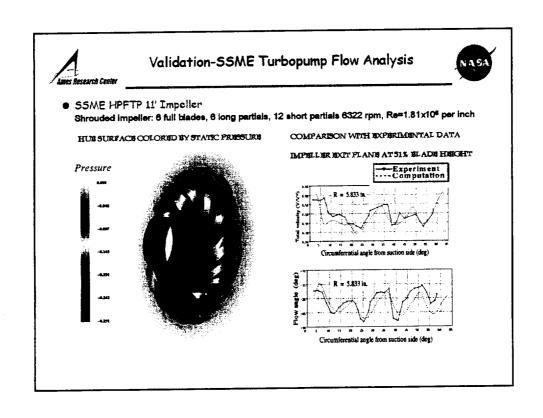


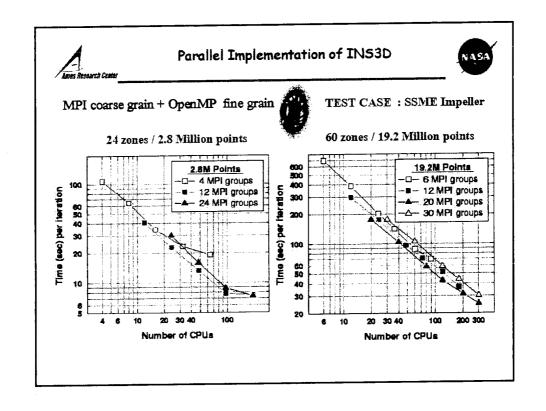
Current Challenges

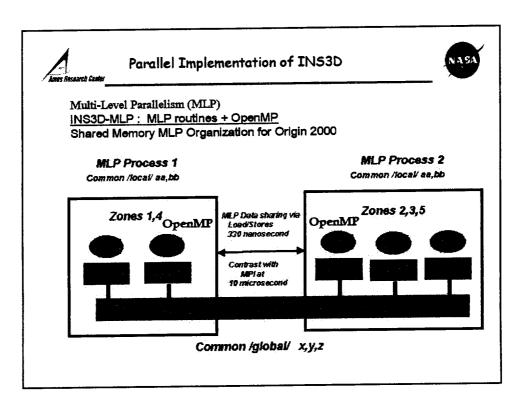


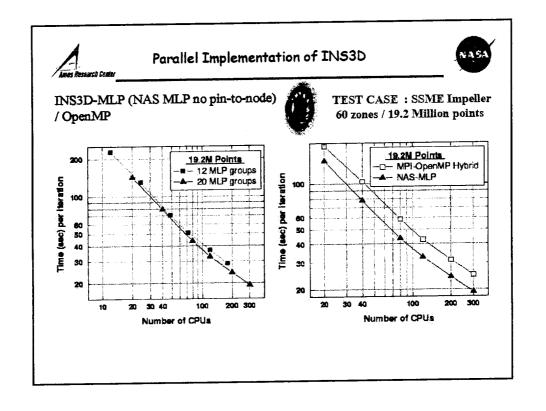
- Challenges where improvements are needed
- Time-integration scheme, convergence
- Moving grid system, zonal connectivity
- Parallel coding and scalability
- As the computing resources changed to parallel and distributed platforms, computer science aspects become important such as
 - Scalability (algorithmic & implementation)
 - Portability, transparent coding etc.
- Computing resources
 - "Grid" computing will provide new computing resources for problem solving environment
 - High-fidelity flow analysis is likely to be performed using "super node" which is largely based on parallel architecture

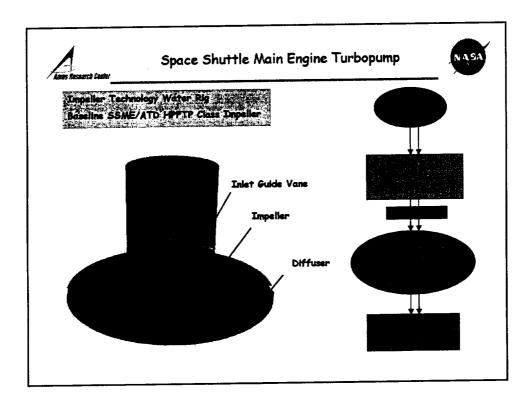


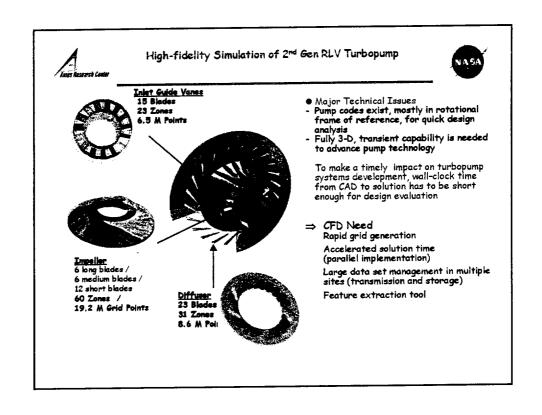


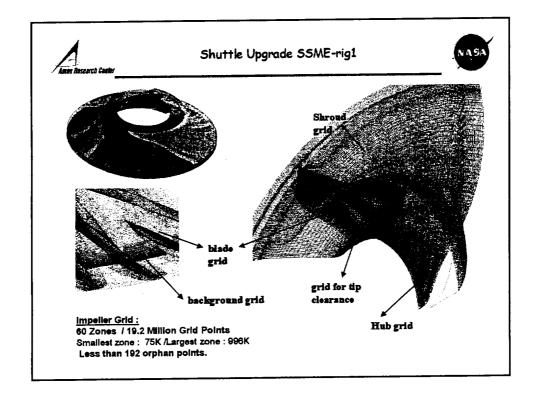














Scripting for Acceleration of Grid Generation



INLET GUIDE VANES AND DIFFUSER

Old IGV New IGV Old DIFF New DIFF
No. of points (million) 7.1 1.1 8.0 1.6

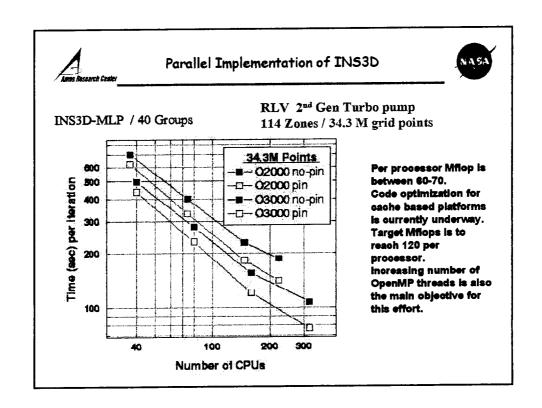
Time to build 1/2 day 10 sec. 1/2 day 8 sec.

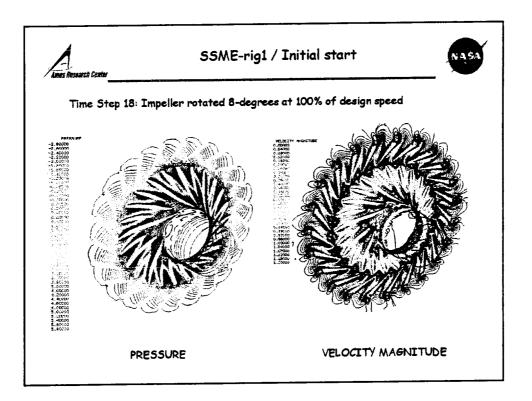
Script timings on new grids based on SGI R12k 300MHz processor

Time to build script = 1 day for IGV, 1 day for DIFF











SSME-rig1 / Initial start



After 2 1/2 rotation:



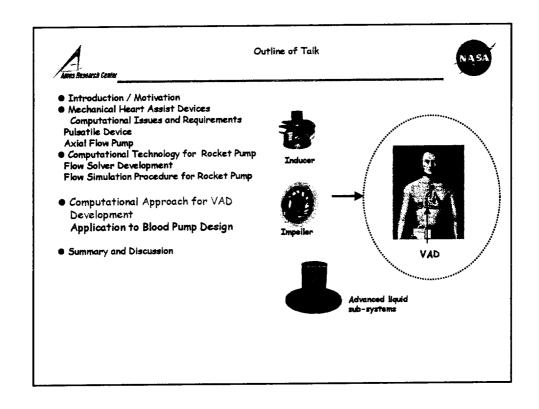
Particle Traces and Pressure

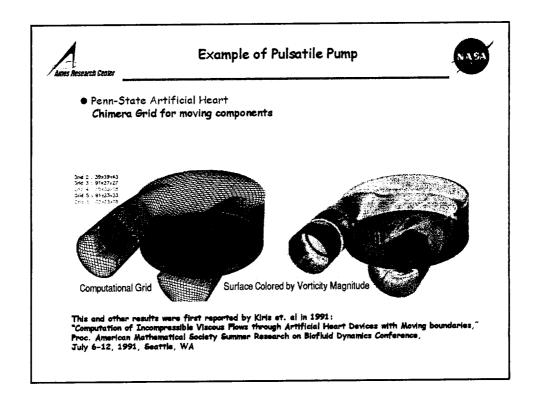
Status

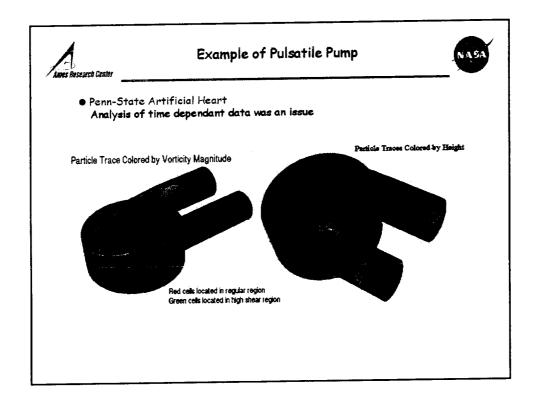
- 34.3 Million Points
- 400 physical time steps in one rotation.
- One physical time-step requires less then 12 minutes wall time with 128 CPU's on Origin platforms. One complete rotation requires 3.5-days wall-clock time with 128 processors dedicated to the task.
- I/O and memory management are critical for wall-clock time reduction

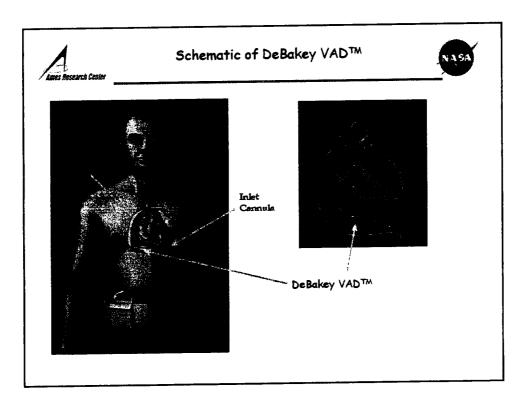
• Issues / Needs

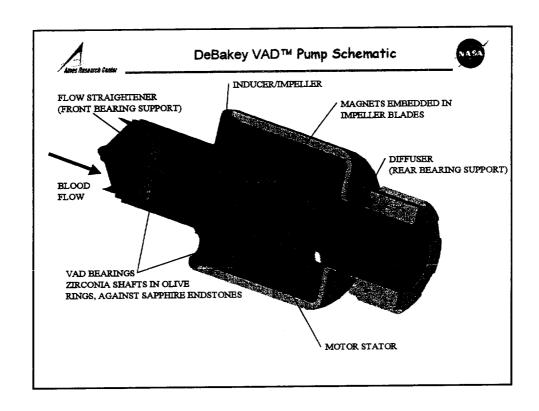
- In reality, more than 10% of the supercomputing facility to one task is not always practical.
- Need 100x bigger supernode or use lowerfidelity method
- Communication to/from designers and experimental group is a part of critical technologies (in Grid computing)













Issues in Axial flow VAD



- Problems Related to Fluid Dynamics
 - Small size requires high rotational speed Highly efficient pump design required
 - -High shear regions in the pump may cause excessive blood cell damage Minimize high shear regions
 - -Local regions of recirculation may cause blood clotting Good wall washing necessary
- ⇒Small size and delicate operating conditions make it difficult to quantify the flow characteristics experimentally



DeBakey VAD Development Timeline



• Baseline Design

- 1984 NASA Johnson Space Center's David Saucier begins initial design work on axial pump VAD with Dr. DeBakey
- 1988 NASA/JSC and Baylor College of Medicine signs Memorandum of Understanding to develop the DeBakey VAD
- 1992 NASA/JSC begins funding the project



NASA/DeBakey VAD (Baseline Design)

NĄSA

NASA / DeBakey Axial Flow VAD Impeller



Zone 2:101 x 39 x 33 Zone 3: $59 \times 21 \times 7$ Zone 4: $47 \times 21 \times 7$

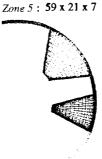
Zone 1:101 x 39 x 33

Geometry



Computational Grid

Rotational Speed: 12,600RPM Flow Rate: 5 lit/min

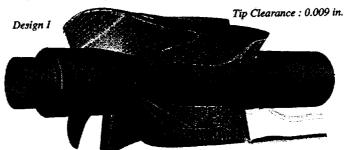


Agues Research Center

NASA/DeBakey VAD (Baseline Design)

NA SA

Flow Pattern Near Suction and Pressure Sides of Full Blade



Traces Colored by Axial Velocity Magnitude

-0.690 -0.365 -0.040 0.28

Rotational Speed: 12,600RPM

Flow Rate: 5 lit/min

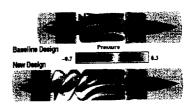
0.610



DeBakey VAD Development Timeline



- CFD Assisted Design
 - 1993 NASA/ARC is asked to develop CFD procedure to improve design and performance. D. Kwak and C. Kiris visit JSC to study the device The technology developed for rocket engine such as the Space Shuttle main engine was to be extended to blood flow simulation
- 1994 Kiris and Kwak begin work on design analysis using NAS supercomputers
- ⇒ NEW DESIGN WAS PROPOSED TO INCLUDE AN INDUCER BETWEEN THE FLOW STRAIGHTNER AND THE IMPELLER





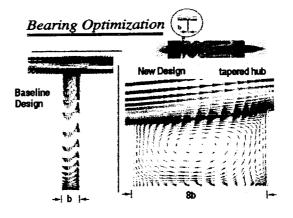
Particle Traces Colored by Velocity Magnitude



DeBakey VAD Development Timeline



- CFD Assisted Design
 - 1994 -Kirls and Kwak continued design changes
 - ⇒ IMPROVE BEARING, HUB AND HUB EXTENSION DESIGN TO REDUCE BLOOD CLOTTING



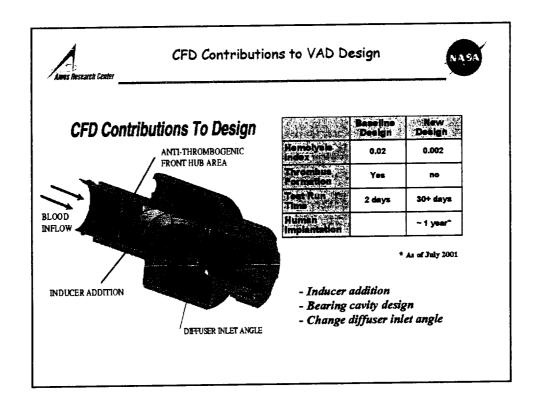


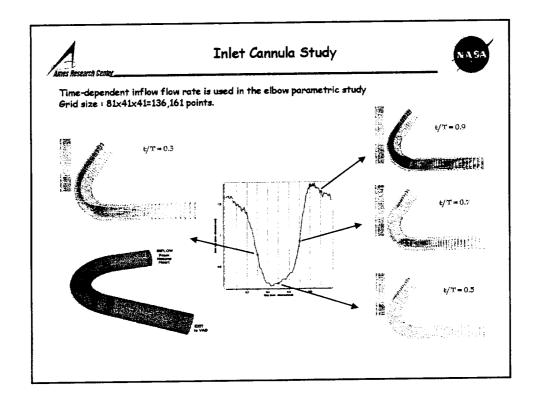
DeBakey VAD Development Timeline

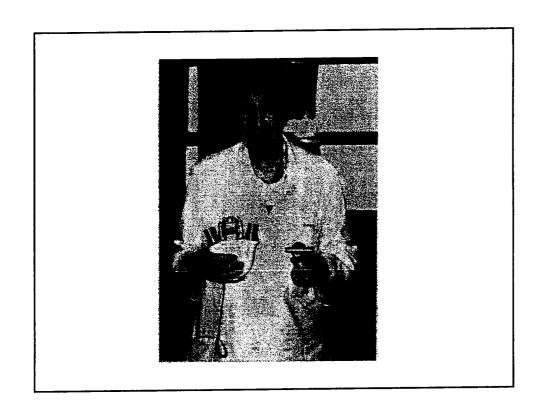


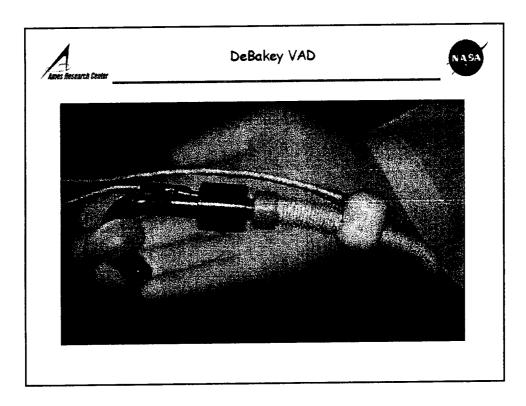
Animal Tests

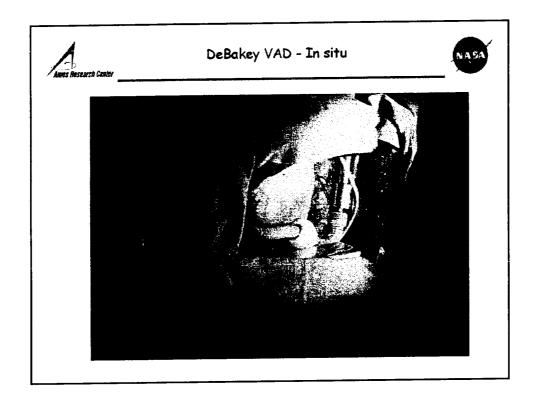
- 1995 Animal implantation: passed two-week requirements
- 1996 Fulli design rights are granted to MicroMed, Inc. to produce the pump Began using bio-compatible titanium replacing polycarbonate
- 1997 Configuration design finalized

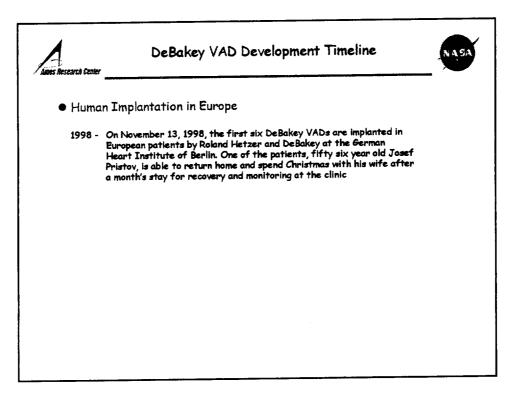














NASA/DeBakey VAD- Patient Pictures







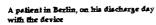
A patient in Munich fully mobile and discharged awaiting transplant

The first patient in Houston with Drs. DeBakey and Noon on her discharge day after transplant



NASA/DeBakey VAD- Patient Pictures







A patient in a regular ward before discharge





NASA/DeBakey VAD Accomplishments to date (7/1/01)



- 120+ patients implanted
- Number of patients currently ongoing with device
- Approved for 20 patients (14 male, 6 female) in a multi-center trial
- European trial Received "CE mark" (the EU equivalent to FDA approval)
- Results to date Favorable compared to existing VADs Small incidence of thrombus is being investigated ⇒ Further computational support is essential



Summary and Discussion-1



- Computational approach provides
 a possibility of quantifying the flow characteristics: especially valuable for analyzing compact design with highly sensitive operating conditions
- a tool for conceptual design and for design optimization
- CFD + rocket engine technology has been applied
 to modify the design of NASA/DeBakey VAD which enabled human implantation
- Computing requirement is still large
 - Unsteady analysis of the entire system from natural heart to aorta involves several hundred revolutions of the impeller
 - During on heart beat, impeller has 125 revolutions
 - With 1024 processors of Origin, one simulation (with several heart beat) from heart to aorta can be completed in months



Summary and Discussion-2



- Further study is needed
 to assess long term impact of mechanical VAD on human body, which
 requires modeling flexible wall and non-Newtonian effect and
 better downstream boundary conditions
- There exist some gaps between
 CFD (assuming IT is a part of CFD applications) and biomedical expertise